

Fact sheet on Financing Immunization Advocacy Response (FAIR) project



🙀 info@hffg.org 🛛 🚹 HFFGGHANA 🍯 @HFFGGHANA 🙆 HFFGGHANA 🛅 Hope For Future Generation



INTROCUDTION

In the pursuit of a healthier and more resilient country, the financing Immunization Advocacy Response (FAIR) Project aims to address critical gaps in immunization funding by advocating increase in domestic resource mobilization at national and/or subnational dedicated to primary healthcare (PHC) and immunization service delivery, Ensuring timely payment of Immunization obligations and also Ensuring new Gavi-supported vaccines are introduced and the country is aware and willing to meet any related increased co-financing obligations. This fact sheet provides a comprehensive overview of the policy framework, key statistics, and significant figures about Ghana's Immunization Programme as well as key messages for the advocacy project.

Country Profile: Ghana

At a Glance:

Sl. No.	Item	
1.	Projected population at mid-year 2023	34,121,985
2.	Birth cohort (2022)	906,677
3.	Surviving Infants (surviving to 1 year per year, 2022)	881,846
4.	Infant mortality rate (deaths < 1 year per 1000 births, 2023)	31/1000
5.	Child mortality rate (deaths < 5 years per 1000 births, 2020)	45/1000
6.	World Bank Index, IDA (2022)	3.5
7.	Gross Nation Income (per capita US\$, 2021)	2360
8.	No. of districts/territories (2021)	260

GAVI Country Report 2022

Sl. No.	Item	
a.	Number of zero dose children at national level (2021)	8,796
b.	% reduction in zero dose at national level, 2019-2021 (2021)	-198%
C.	DTP1 coverage at the national level (2021)	99%
d.	DTP3 coverage at the national level (2021)	98%
e.	MCV1 coverage at the national level (2021)	94%
f.	Drop out from DTP1 to DTP3 at national level (2021)	1%
g.	Geographic equity:	
h.	Geographic equity: Drop out from DTP1 to last routine dose of MCV at national level (2021)	16%
i.	DTP3 coverage in the 20% of districts with lowest coverage (2021)	68%

Key Immunization Indicators at a glance:

GAVI Country Report 2022

Facts About the Gavi Co-financing Policy

- Together with the <u>eligibility and transition policy</u>, the co-financing policy is at the heart of Gavi's catalytic funding model.
- As Gavi-supported countries progress on a trajectory of increasing GNI per capita towards phasing out of Gavi support, they increasingly take on higher levels of co-financing.
- The co-financing policy encourages governments in Gavisupported countries to invest in new vaccines, enhancing country ownership of vaccine financing.
- It helps them plan for financially sustainable immunisation programmes in preparation for phasing out of Gavi support for these vaccines.
- Since 2008, all countries applying to Gavi for <u>new vaccine support</u> co-finance a portion of the cost. The co-financing requirement for individual countries depends on their transition phase and

Facts About the Gavi Co-financing Policy

- Together with the <u>eligibility and transition policy</u>, the co-financing policy is at the heart of Gavi's catalytic funding model.
- As Gavi-supported countries progress on a trajectory of increasing
 GNI per capita towards phasing out of Gavi support, they increasingly take on higher levels of co-financing.
- The co-financing policy encourages governments in Gavi-supported countries to invest in new vaccines, enhancing country ownership of vaccine financing.

It helps them plan for financially sustainable immunisation programmes in preparation for phasing out of Gavi support for these vaccines.

Since 2008, all countries applying to Gavi for <u>new vaccine support</u> cofinance a portion of the cost. The co-financing requirement for individual countries depends on their transition phase and vaccination strategy per the Eligibility and Transition Policy. Certain vaccines, such as IPV and malaria, have bespoke rules.

In the initial self-financing phase, the government's contribution is a flat amount: US\$ 0.20 per dose of any Gavi-supported vaccine that is used in routine immunization programs.

 This contribution is intended primarily to reinforce country ownership and build procurement capacity, without discouraging new vaccine adoption.

When a country enters the preparatory transition phase, the government's contribution increases by 15 percent per year. In this phase, the co-financing requirement is a percentage of the price of vaccines, and the absolute amount will thus vary from vaccine to vaccine.

A country enters accelerated transition when a country's average GNI per capita over the past three years exceeds the eligibility threshold

3

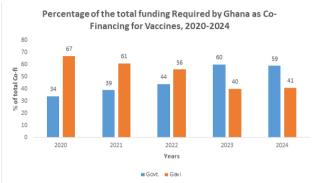
- Signatures of both the Minister of Health and Minister of Finance or their delegated authority are required to endorse the final PSR before submission to Gavi.
- The PSR will be reviewed by members of the independent review committee (IRC) who will make a recommendation to Gavi on the full portfolio of support for the duration of the PSR, including any current support that needs to be renewed.
- It is recommended that this process be initiated 15-18 months prior to the expected grant disbursement.
 Vaccine applications are developed via Gavi's online country portal and submitted for review and approval 15 to 18 months before the planned vaccine launch or campaign.
- On an annual basis, the budget will be reviewed and updated to take into account implementation progress and any new information from the joint appraisal.
 Source: <u>https://www.gavi.org/sites/default/files/programmes-</u> impact/gavi-eligibility-and-transition-policy

Projected Estimates of Funding Required by Ghana to complement the GAVI Financing for Vaccines

RI Co-	2020	2021	2022	2023	2024 in
Financed by	In	In	In	In	USD
	USD	USD	USD	USD	
Govt.	7,839,467	9,041,813	10,468,234	12,123,552	14,043,540
GAVI	15,535,107	14,408,511	13,142,373	11,652,812	9,907,286
Total	23,374,574	23,450,324	23,610,608	23,776,363	23,950,826

Source: GAVI [Ghana] 2018 Programme Support Rationale [Strategic period (2020-2024) Source: GAVI [Ghana] 2018 Programme Support Rationale [Strategic period (2020-2024)

These estimates provide visibility to the total funding needs that a country should plan to complement the Gavi financing. These estimates are projections and may differ from actual commitments, which are calculated year-by-year and reflected in Gavi decision letters. The source of these estimates is the latest input received from the Projected country, with adjustments performed by the Gavi Secretariat (e.g. price updates, supply constraints, etc.



Source: GAVI [Ghana] 2018 Programme Support Rationale [Strategic period (2020-2024)

Co-financing projections for Ghana in Millions of USD, 2020-2024



Source: https://www.gavi.org/co-financing-information-sheet-ghana

- Projections are based on Gavi's operational forecast version 16.
- Projections do not guarantee renewal of support or approval of country's application.
- Final co-financing obligations are communicated through decision letters.

The benefit-cost ratio including immunization cost with mitigation measures in the African Countries is 38:1 by using the Cost of Illness (COI) method and 97:1 Value of Statistical Life Year method (VSLY), which indicates that Government investment in the immunisation program is highly beneficial even in economic terms. (Source: Watts, E, Mak, J. and Patenaude, B. 2022. "Benefit-Cost Ratios of Continuing Routine Immunization During the COVID-19 Pandemic in Africa." Journal of Benefit-Cost Analysis 13: 91–106, doi:10.1017/bca.2021.1)

Timeliness of GAVI Co-Financing Payments, 2022 and 2023

- For 2022, the full payment for the year was disbursed only in the first quarter of 2023.
- For 2023, 60% of the vaccine financing amount was paid to Gavi by the second quarter of the year.

So, whilst the performance of 2023 is better than 2022, it needs to improve. As the country is in Gavi's accelerated transition phase, early release every year to ensure there is no stock out is recommended. The information above only pertains to Gavi vaccines, there is an issue with the timely financing for traditional non-Gavi co-financing vaccines as well.

Calls to Action

- Treating diseases are expensive. Immunization is a cost-effective way to prevent them and save on medical bills.
- Healthy workers are productive workers. Immunization keeps our workers healthy and productive and our economy runs smoothly.
- Low-income families suffer the most. Spending on treatment means less for essentials like food and education.
- Timely payment demonstrates commitment Ghana must timely complete its co-financing obligations. This secures continuous access to life-saving vaccines for children.
- By honouring our co-financing commitments, Ghana does not only

- By honouring our co-financing commitments, Ghana does not only demonstrate reliability but also guarantees uninterrupted vaccine supply.
- It is crucial that the government recognizes the importance of investing in immunization as an indispensable part of public health and economic development strategies. It is a proactive approach that not only saves lives but also fosters sustainable growth and prosperity
- Adequate immunization financing is expedient to ensure the availability of vaccines, robust healthcare infrastructure, and widespread vaccination coverage which collectively contribute to preventing the spread of diseases and safeguarding public health.
- Investing in immunization yields long-term benefits by reducing healthcare costs and preventing outbreaks.
- Aligning immunization financing with universal health coverage (UHC) commitments ensures that immunization services are integrated into broader health systems, making healthcare more accessible and equitable for all.
- The government of Ghana must adopt new mechanisms of sustainable funding beyond foreign donors to ensure continuity of important healthcare initiatives. This move will go a long way to ensure the eventual result of self-financing.
- Alternative avenues can be considered to enhance financing immunization such as trust funds and earmarked taxes. However, the pursuit of secondary sources should not distract the governments and advocates from ensuring adequate and sustainable allocations from the general health budget both for immunization and for broader health service delivery.
- Child immunisation is a right, invest in the immunisation of our future generations.
- Immunization Sovereignty Should be the goal! Let's mobilize and support the effective use of domestic resources on a reliable basis to achieve current and future immunization targets.
 #ImmunizeGH

7